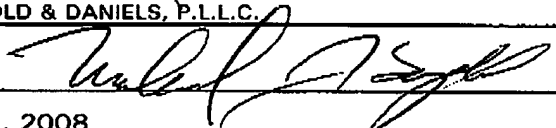



AUG 19 2008

PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0861-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/517.994
	Confirmation Number	7265
	Filing Date	with an effective filing date of June 21, 2003
	First Named Inventor	Uwe BEER and Michael DRABEK
	Group Art Unit	3623
	Examiner Name	Doron D. Fields Fax: (571) 273-8300
Total No. of Pages in this Submission: 7	Attorney Docket Number	ZAHFRI P701US
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response - 6 pgs. <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
REMARKS		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Michael J. Bujold DAVIS BUJOLD & DANIELS, P.L.L.C. <div style="text-align: right;">Reg. No. 32,018 CUSTOMER NO. 020210</div>	
Signature		
Date	August 19, 2008	
CERTIFICATE OF TRANSMISSION		
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on August 19, 2008.		
Signature	 <div style="text-align: right;">Date: August 19, 2008 (nay)</div>	

**RECEIVED  
CENTRAL FAX CENTER**

**AUG 19 2008**

**Response Under 37 CFR 1.116  
Expedited Procedure  
Examining Group: 3623**

**PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of	:	Uwe BEER and Michael DRABEK
Serial no.	:	10/517,994
Confirmation No.	:	7265
Filed	:	with an effective filing date of June 21, 2003
For	:	SHIFTING DEVICE
Group Art Unit	:	3623
Examiner	:	Doron D. Fields
Docket	:	ZAHFRI P701US

**BOX AF**  
The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE**

Dear Sir:

**[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.**

In response to the official action mailed June 3, 2008 and the Advisory Actions mailed July 18, 2008 and August 6, 2008, please enter the following before reconsideration of this application.

**In the Claims:**

Please cancel claims 6, 8, 10 and 13, without prejudice or disclaimer of the subject matter therein, and amend claims 7, 9 and 12 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.